

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214514544				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: Catholic Charities USA</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY BANK OF AMERICA CENTER 16TH FL 1111 EAST MAIN ST RICHMOND, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 1/31/2014</p> <p>SCC ID NO: 07598501</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED		
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<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 2050 Ballenger Avenue Suite 400</p> <p style="margin-left: 40px;">CITY/ST/ZIP: ALEXANDRIA, VA 22314</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: Larry Snyder TITLE: PRESIDENT ADDRESS: 2050 Ballenger Avenue Suite 400 CITY/ST/ZIP/CO: ALEXANDRIA, VA 22314 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> <td style="width: 30%;"></td> </tr> </table>			NAME: Larry Snyder TITLE: PRESIDENT ADDRESS: 2050 Ballenger Avenue Suite 400 CITY/ST/ZIP/CO: ALEXANDRIA, VA 22314	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME:	Elida El-Gawly	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	2050 Ballenger Avenue Suite 400		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314		
NAME:	David Zubik	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EPISC. LIAISON		
ADDRESS:	2050 Ballenger Avenue Suite 400		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314		
NAME:	Jesse Bean	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2050 Ballenger Avenue Suite 400		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314		
NAME:	Steve Bogus	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2050 Ballenger Avenue Suite 400		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314		
NAME:	Steven Bresnahan	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2050 Ballenger Avenue Suite 400		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314		
NAME:	Nancy Galeazzi	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2050 Ballenger Avenue Suite 400		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314		
NAME:	Martin Gutierrez	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2050 Ballenger Avenue Suite 400		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314		
NAME:	Gregory Kepferle	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2050 Ballenger Avenue Suite 400		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314		
NAME:	Andrew Linbeck	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2050 Ballenger Avenue Suite 400		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314		
NAME:	Isaiah McKinnon	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2050 Ballenger Avenue Suite 400		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Timothy Noelker DIRECTOR 2050 Ballenger Avenue Suite 400 ALEXANDRIA, VA 22314	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Martina O'Sullivan DIRECTOR 2050 Ballenger Avenue Suite 400 ALEXANDRIA, VA 22314	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Heather Reynolds DIRECTOR 2050 Ballenger Avenue Suite 400 ALEXANDRIA, VA 22314	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Brian Soukup DIRECTOR 2050 Ballenger Avenue Suite 400 ALEXANDRIA, VA 22314	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Kevin Sullivan DIRECTOR 2050 Ballenger Avenue Suite 400 ALEXANDRIA, VA 22314	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.				
/s/ Larry Snyder		Larry Snyder, PRESIDENT		3/19/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		PRINTED NAME AND CORPORATE TITLE		DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.				